County: Waukesha AVALON HEALTH CARE CENTER 222 PARK PLACE WAUKESHA 53186

Ownership:
Highest Level License:
Operate in Conjunction with CBRF?
Title 18 (Medicare) Certified?
Average Daily Census:

Skilled No No 20

Non-Profit Church Related

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Services Provided to Non-Residents		Age, Sex, and Primary Diagn	osis of	Residents (12/31	1/00)	Length of Stay (12/31/0	0) %
Home Health Care Supp. Home Care-Personal Care Supp. Home Care-Household Services Day Services Respite Care Adult Day Care Adult Day Health Care Congregate Meals Home Delivered Meals Other Meals	No No No No No No No No	Primary Diagnosis  Developmental Disabilities Mental Illness (Org./Psy) Mental Illness (Other) Alcohol & Other Drug Abuse Para-, Quadra-, Hemiplegic Cancer Fractures	0. 0 40. 0 0. 0 0. 0 0. 0 5. 0 0. 0 20. 0	Age Groups Under 65 65 - 74 75 - 84 85 - 94 95 & Over	0. 0 0. 0 10. 0 60. 0 30. 0	Less Than 1 Year 1 - 4 Years More Than 4 Years  **************************  Full-Time Equival Nursing Staff per 100 (12/31/00)	
Transportation Referral Service Other Services Provide Day Programming for Mentally Ill Provide Day Programming for Developmentally Disabled ************************************	No No No No No	Cardiovascul ar Cerebrovascul ar Di abetes Respiratory Other Medical Conditions	10. 0 0. 0 0. 0 25. 0  100. 0	Sex over	25. 0 75. 0  100. 0	RNs LPNs Nursing Assistants Aides & Orderlies	17. 1 3. 1 37. 2

## Method of Reimbursement

	Medicare (Title 18)			Medicaid (Title 19)			Other P			Private Pay				d Care		Percent	
			Per Diem			Per Die	m		Per Die	m		Per Dien	1	]	Per Diem	Total	Of All
Level of Care	No.	%	Rate	No.	%	Rate	No.	%	Rate	No	. %	Rate	No.	%	Rate	No.	Resi dents
Int. Skilled Care	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0%
Skilled Care	Ŏ	0. 0	\$0.00	Ŏ	0. 0	\$0.00	Ŏ	0. 0	\$0.00	18		\$150.49	Ŏ	0. 0	\$0.00	18	90. 0%
Intermedi ate				0	0.0	\$0.00	0	0.0	\$0.00	2	10.0	\$150.49	0	0.0	\$0.00	2	10.0%
Limited Care				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Personal Care				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Residential Care				0	0.0	<b>\$0. 00</b>	0	0.0	\$0.00	0	0.0	<b>\$0.00</b>	0	0.0	<b>\$0. 00</b>	0	0.0%
Dev. Di sabl ed				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Traumatic Brain Inj	. 0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Ventilator-Depender	t 0	0.0	<b>\$0. 00</b>	0	0.0	<b>\$0. 00</b>	0	0.0	\$0.00	0	0.0	<b>\$0.00</b>	0	0.0	<b>\$0. 00</b>	0	0.0%
Total	0	0. 0		0	0.0		0	0.0		20	100.0		0	0.0		20	100.0%

Admissions, Discharges, and Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/00 Deaths During Reporting Period % Needi ng Total Assistance of Activities of Percent Admissions from: % Totally Number of Private Home/No Home Health 37.5 Daily Living (ADL) Independent One Or Two Staff Dependent Resi dents Private Home/With Home Health 0.0 Baťhi ng 0.0 **65.** 0 35. 0 20 Other Nursing Homes 12.5 Dressing 5. 0 **60.** 0 35.0 20 Acute Care Hospitals
Psych. Hosp. - MR/DD Facilities
Rehabilitation Hospitals Transferring 20.0 40.0 20 **50.0** 40.0 20 0.0 Toilet Use 15.0 75.0 10.0 20 0.0 Eating 50. 0 30.0 20.0 \*\*\*\*\*\* Other Locations 0.0 Total Number of Admissions 16 Continence Special Treatments Receiving Respiratory Care
Receiving Tracheostomy Care
Receiving Suctioning
Receiving Ostomy Care Percent Discharges To: Indwelling Or External Catheter 0.0 0.0 Private Home/No Home Health 13.3 Occ/Freq. Incontinent of Bladder **35.** 0 0.0 Private Home/With Home Health 13. 3 Occ/Freq. Incontinent of Bowel **35. 0** 0.0 Other Nursing Homes 20.0 0.0 Acute Care Hospitals
Psych. Hosp. - MR/DD Facilities
Rehabilitation Hospitals Receiving Tube Feeding Receiving Mechanically Altered Diets 13. 3 Mobility 0.0 Physically Restrained 10.0 0.0 25. 0 0.0 Other Locations 0.0 Skin Care Other Resident Characteristics Deaths 40.0 With Pressure Sores 0.0 Have Advance Directives 100.0 Total Number of Discharges With Rashes 30.0 Medi cati ons Receiving Psychoactive Drugs (Including Deaths)

Selected Statistics: This Facility Compared to All Similar Milwaukee Metropolitan Area Facilities & Compared to All Facilities

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			Ownershi p:		Bed Size:		ensure:		
	Thi s	Non	profit	Und	er 50	Ski l	lled	Al l	
	Facility	Peer Group		Peer Group			Group	Facilities	
	%	%	Ratio	%	Ratio	%	Ratio	%	Ratio
Occupancy Potes Avenues Deily Consus/Licensed Pods			0. 99	$7\overset{7}{4}$ . 2	1. 23		1. 11		1.08
Occupancy Rate: Average Daily Census/Licensed Beds	90. 9	91. 5				81. 9		84. 5	
Current Residents from In-County	90. 0	87. 4	1. 03	85. 6	1. 05	85. 6	1. 05	77. 5	1. 16
Admissions from In-County, Still Residing	<b>50.</b> 0	27. 5	1. 82	30. 4	1. 65	23. 4	2. 13	21. 5	2. 33
Admissions/Average Daily Census	80. 0	115. 2	0. 69	95. 0	0.84	138. 2	0. 58	124. 3	0.64
Discharges/Average Daily Census	<b>75.</b> 0	118. 5	0. 63	103. 0	0. 73	139. 8	0. 54	126. 1	0. 59
Discharges To Private Residence/Average Daily Census	20. 0	35. 5	0. 56	8. 0	2. 51	48. 1	0. 42	49. 9	0.40
Residents Receiving Skilled Care	90. 0	89. 5	1. 01	73. 4	1. 23	89. 7	1.00	83. 3	1. 08
Residents Aged 65 and Older	100	96. 9	1.03	96. 3	1.04	92. 1	1. 09	87. 7	1. 14
Title 19 (Médicaid) Funded Residents	0.0	<b>57. 6</b>	0.00	50. 5	0.00	65. 5	0.00	69. 0	0.00
Private Pay Funded Residents	100	35. 4	2. 82	45. 2	2. 21	24. 5	4. 09	22. 6	4. 43
Developmentally Disabled Residents	0. 0	0. 4	0.00	0. 0	0.00	0. 9	0.00	7. 6	0.00
Mentally Ill Residents	40. 0	30.8	1. 30	52. 7	0. 76	31. 5	1. 27	33. 3	1. 20
General Medical Service Residents	25. 0	24. 9	1.00	8. 0	3. 13	21. 6	1. 16	18. 4	1. 36
Impaired ADL (Mean)	<b>56.</b> 0	50. 5	1. 11	51. 9	1. 08	50. 5	1. 11	49. 4	1. 13
Psychological Problems	40.0	45. 5	0.88	36. 7	1. 09	49. 2	0.81	50. 1	0.80
Nursing Care Required (Mean)	6. 9	6. 6	1. 05	6. 4	1.07	7. 0	0. 98	7. 2	0. 96